

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)			Application Number 10/579,379		Filing Date 10 January, 2007		<input type="checkbox"/> To be Mailed						
			Applicant(s) SCHWAB, MARKUS						Page 1 of 1				
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 03/14/2008		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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2				1			52						
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50							100						
Total Indep		4					Total Indep						
Total Depend			24				Total Depend						
Total Claims			28				Total Claims						

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